24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

| Schedule E) FOR SE OF FORM 24/48 | | | |
|---|---|----------------------------------|--|
| NAME OF COMMITTEE (In Full) RHODE ISLAND STATE RIGHT TO LIFE COMMITTEE INC C C00426528 | | | |
| Check if X 24-hour report 48-hour report New report Amends report filed on | | | |
| | Full Name of Payee Facebook, Inc. Mailing Address Dept. 415 P.O. Box 10005 | | Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Palo Alto CA 943 | Code | 300.00 Transaction ID : SE.4229 Date of Disbursement or Obligation |
| | Boost Posts - ESTIMATE Name of Federal Candidate | ategory/ Type Support Office | 04 15 2016 Sought: House District: |
| | Ted Cruz | Oppose | President Senate State: RI |
| | Calendar Year-To-Date Per Election for Office Sought | 895.57 Disbu 2016 | rsement For: |
| | Full Name of Payee | | Date of Public Distribution/Dissemination |
| | Mailing Address | | Amount |
| | City State Zip | o Code | |
| | Purpose of Expenditure Ca | Category/ Type | Date of Disbursement or Obligation |
| | Name of Federal Candidate | Support Office Oppose | Sought: House District: President Senate State: |
| | Calendar Year-To-Date Per Election for Office Sought | Disbu | rsement For: |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | |
| | (b) SUBTOTAL of Unitemized Independent Expenditures | ····· | |
| | (c) TOTAL Independent Expenditures | ····· | 300.00 |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | |
| | Paul J Maloney [Electronicall] Signature | ly Filed] Date 0 | M / D D D / Y D Y D Y D Y D D D D D D D D |
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